

	21b		22		23		24		25		26
	27	X	28a		28b		28c		29		30b

DCCC

### A. Howard Osborn

Mailing Address 3000 S 1st St

City	State	Zip Code
Champaign	IL	61822-7108

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : VT3CV9J3F91

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

### B. Howard Osborn

Mailing Address 3000 S 1st St

City	State	Zip Code
Champaign	IL	61822-7108

Purpose of Disbursement	Contribution Refund

Candidate Name	
1	1
2	2
3	3
4	4
5	5
6	6
7	7
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91	91
92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : VT3CV9J3FD3

Amount of Each Disbursement this Period

Age Group	Number of people
13-17	10.0
18-24	12.0
25-34	14.0
35-44	15.0
45-54	13.0
55-64	11.0
65-74	9.0
75-84	7.0
85+	5.0

Full Name (Last, First, Middle Initial)

### C. Howard Osborn

Mailing Address 3000 S 1st St

City	State	Zip Code
Champaign	IL	61822-7108

Purpose of Disbursement	Contribution Refund

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : VT3CV9J3FE1

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

Age Group	Percentage
18-24	10%
25-34	15%
35-44	20%
45-54	25%
55-64	30%
65-74	35%
75-84	40%
85+	70.00%